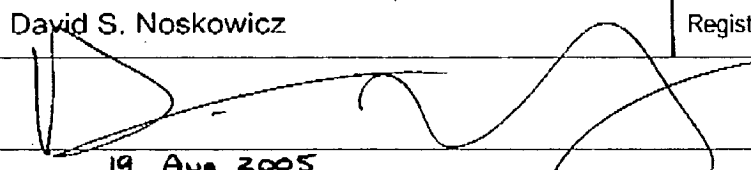
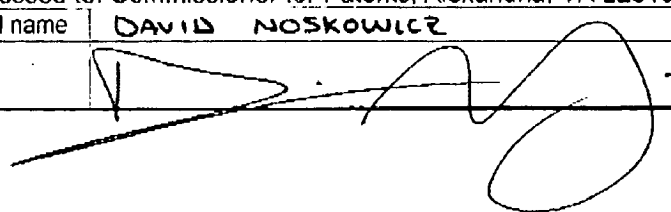
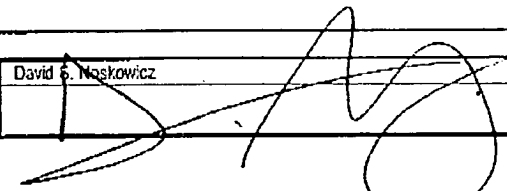


TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/751,057	
	Filing Date	January 2, 2004	
	First Named Inventor	PUTCHA, et al.	
	Group Art Unit	2661	
	Examiner Name	Kading, Joshua	
Total Number of Pages in this Submission	10	Attorney Docket Number	CS90098

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs _____	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual	David S. Noscowicz	Registration No.	55,503
Signature			
Date	19 Aug 2005		

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO to facsimile number 703-273-8300 or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313 on the date listed below:	
Typed or printed name	DAVID NOSKOWICZ
Signature	
Date	19 Aug 2005

FEE TRANSMITTAL					Patent fees are subject to annual revision																																																							
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					Complete if Known																																																							
TOTAL AMOUNT OF PAYMENT (\$)-0-					Application Number	10/751,057																																																						
					Filing Date	January 2, 2004																																																						
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METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)																																																							
Check	<input type="checkbox"/>	Credit card	<input type="checkbox"/>	Money Order	<input type="checkbox"/>	Other	<input type="checkbox"/>	None	<input type="checkbox"/>																																																			
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 502117 Deposit Account Name: Motorola, Inc. The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.					4. ADDITIONAL FEES																																																							
FEE CALCULATION																																																												
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																																																												
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Application Type</th> <th colspan="2">FILING FEES</th> <th colspan="2">SEARCH FEES</th> <th colspan="2">EXAMINATION FEES</th> <th rowspan="2">Fee Paid (\$)</th> </tr> <tr> <th>Large Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Large Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Large Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>200</td> <td>100</td> <td></td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> <td>100</td> <td>50</td> <td>130</td> <td>65</td> <td></td> </tr> <tr> <td>Plant</td> <td>200</td> <td>100</td> <td>300</td> <td>150</td> <td>160</td> <td>80</td> <td></td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>600</td> <td>300</td> <td></td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>100</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td></td> </tr> </tbody> </table>					Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)	Large Fee (\$)	Small Entity Fee (\$)	Large Fee (\$)	Small Entity Fee (\$)	Large Fee (\$)	Small Entity Fee (\$)	Utility	300	150	500	250	200	100		Design	200	100	100	50	130	65		Plant	200	100	300	150	160	80		Reissue	300	150	500	250	600	300		Provisional	200	100	0	0	0	0			
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2. EXTRA CLAIM FEES Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple Dependent Claims <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>50</td> <td>25</td> </tr> <tr> <td>200</td> <td>100</td> </tr> <tr> <td>350</td> <td>180</td> </tr> </tbody> </table> Total Claims: <input type="text"/> Extra Claims: <input type="text"/> Fee (\$): <input type="text"/> Fee Paid (\$): <input type="text"/> - 20 or HP = <input type="text"/> x 50 = <input type="text"/> HP = highest number of total claims paid for, if greater than 3 Indep. Claims: <input type="text"/> Extra Claims: <input type="text"/> Fee (\$): <input type="text"/> Fee Paid (\$): <input type="text"/> - 3 or HP = <input type="text"/> x 200 = <input type="text"/>					Fee (\$)	Small Entity Fee (\$)	50	25	200	100	350	180																																																
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3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee is \$250 (\$125 for small entity) For each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e). Total Sheets: <input type="text"/> Extra Sheets: <input type="text"/> Number of each additional 50 or fraction thereof: <input type="text"/> Fee (\$): <input type="text"/> Fee Paid (\$): <input type="text"/> - 100 = <input type="text"/> - 50 = <input type="text"/> (round up to a whole number) x 250 = <input type="text"/>																																																												
SUBMITTED BY Name (Print/Type): David S. Moskowitz Signature: 					5. OTHER FEE(S) (specify) Non-English Specification: \$130 fee (no small entity discount) Fee Paid (\$): <input type="text"/>																																																							
Registration No. 55,503 Telephone 847-523-2333 Date 19 Aug 2005																																																												

Serial No. 10/751,057
Page 1

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APPLICANT: PUTCHA, Padmaja.
SERIAL NO.: 10/751,057
FILED: 2 January 2004

EXAMINER: Kading, Joshua
GROUP: 2661
CASE NO.: CS90098

ENTITLED: Multicasting Data Method in a Radio Communication System

REPLY AND AMENDMENT UNDER 37 C.F.R. § 1.111

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Commissioner:

Responsive to the Office Action dated 19 May 2005, consideration of the following remarks and withdrawal of the outstanding objections and rejections is respectfully requested.

Please amend the above-referenced application as follows:

Amendments to the claims begin on page 2.

Remarks begin on page 6.